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SCHEDULE B (FEC Form 3)		FOR LINE NUME		BER: PAGE 308 / 364	
ITEMIZED DIS	BURSEMENTS	Use separate schedule(s)	(check only one)		
		for each category of the Detailed Summary Page	☑ 17 ☐ 18 ☐ 20c ☐ 21	19a19b20a20b	
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
NAME OF COMMIT Donna Edwards	TEE (In Full) for Senate				
Full Name (Last, First, Middle Initial)				Transaction ID: VPEPF9XYK28	
ActBlue Technical Services				Date of Disbursement	
Mailing Address				06/01/2015	
366 Summer St					
City State Zip Code					
Somerville	MA	02144-3132		Amount of Dishumoment this Device	
Purpose of Disbursement				Amount of Disbursement this Period	
Credit Card Processing Fees				\$335.86	
Candidate Name			Category/ Type		
Office County	Tallana le		туре		
Office Sought:	Senate	sement For: 2016	<b>.</b>		
State:	President District:		Seneral		
State.	District:	Other (specify)			
Full Name (Last, Firs	t, Middle Initial)			Transaction ID: VPEPF9XZYG8	
ActBlue Technical Services				Date of Disbursement	
Mailing Address				06/03/2015	
366 Summer St	<u> </u>			Security and conjugate and an extension and an extension and and an extension and an extens	
City	St	ate Zip Code			
Somerville	MZ	02144-3132		Amount of Disbursement this Period	
Purpose of Disburser Credit Card Pro					
			<u> </u>	\$216.52	
Candidate Name			Category/ Type		
Office Sought:	House Disburs	One of Fee	.,,,,,		
Onice Sought.	Senate	sement For: 2016	Seneral		
State:	President District:		seneral .		
		Other (specify)			
Full Name (Last, First, Middle Initial)				Transaction ID: VPEPF9Y6HD2	
ActBlue Technical Services				Date of Disbursement	
Mailing Address				06/08/2015	
366 Summer St					
City Somerville		ate Zip Code		<u> </u>	
Purpose of Disburser	ment MA	02144-3132		Amount of Disbursement this Period	
Credit Card Pro				\$236.95	
Candidate Name			Category/		
Caracate Name			Type		
Office Sought:	House Disburs	ement For: 2016			
g. ···	Senate President		Seneral		
State:	District:	Other (specify)	/		
		V1 ****/			
SUBTOTAL of Rece	eipts This Page (optional)	. —		\$789.33	
TOTAL This Period (last page this line number only)					
TOTAL THIS PERIOD	(rest page this line number only)				